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PART B ISSUE FEE TRANSMITTAL

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block 3 below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. See reverse for Certificate of Mailing.

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1. CORRESPONDENCE ADDRESS		2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)	
<p>ROBERT J. STERN 1360 COTTON ST MENLO PARK, CA 94025</p> <p>RECEIVED Publishing Division DEC - 3 1996 05</p>		<p>INVENTOR'S NAME JOHN R. TUTTLE Street Address: 5514 WEST LAKE RIVER City, State and ZIP Code: BOISE, IDAHO 83703</p> <p>CO-INVENTOR'S NAME Street Address City, State and ZIP Code</p> <p><input type="checkbox"/> Check if additional changes are on reverse side NO</p>	

SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS (eis)	EXAMINER AND GROUP/ART UNIT	DATE MAILED
08/619,274	03/18/96	153	KOBRYANT	09/03/96

First Named Applicant	SNODGRASS,	CHARLES E.
TITLE OF INVENTION	DATA COMMUNICATION METHOD USING IDENTIFICATION PROTOCOL	

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
2 92-165.4	442-042-000	142	UTILITY	NO	\$1,250.00	12/03/96

3. Correspondence address change (Complete only if there is a change)	4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.
<u>MICRON TECHNOLOGY, INC.</u> <u>LAW DEPT. - M/S 525</u> <u>8000 S. FEDERAL WAY</u> <u>BOISE, ID 83707</u>	<u>WILLIAM R. BACHANI</u> <u>ROBERT J. STERN</u>

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (if any)	6. The following fees are enclosed: <input checked="" type="checkbox"/> Issue Fee <input type="checkbox"/> Advance Order - # of Copies <input type="checkbox"/> Any Deficiencies in Enclosed Fees
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(1) NAME OF ASSIGNEE: <u>MICRON TECHNOLOGY, INC.</u>	6a. The following fees should be charged: <input checked="" type="checkbox"/> THIS ADDRESS 10
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(2) ADDRESS: (CITY & STATE OR COUNTRY) <u>BOISE, IDAHO</u>	6b. DEPOSIT ACCOUNT NUMBER (ENCLOSE PART C) <input type="checkbox"/> Issue Fee <input type="checkbox"/> Advance Order - # of Copies <input type="checkbox"/> Any Deficiencies in Enclosed Fees
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A. <input type="checkbox"/> This application is NOT assigned.	The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.
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<input checked="" type="checkbox"/> Assignment previously submitted to the Patent and Trademark Office.	(Authorized Signature)
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<input type="checkbox"/> Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.	(Date)
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PLEASE NOTE: Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.	NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.
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1. TRANSMIT THIS FORM WITH FEE/CERTIFICATE OF MAILING ON REVERSE	
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